

ED 142 927

CG 011 713

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TITLE The Counseling Referral Process and Degree of Understanding of Helping Services at the University of Kansas. Research Report No. 77-2.
INSTITUTION Kansas Univ., Lawrence. Counseling Center.
PUB DATE [77]
NOTE 16p.
EDRS PRICE MF-\$0.83 HC-\$1.67 Plus Postage.
DESCRIPTORS *Educational Counseling; Faculty Advisors; Guidance Centers; *Guidance Services; Higher Education; *Information Services; Personnel Evaluation; *Referral; Research Projects; State Universities; *Student Personnel Workers

ABSTRACT

The counseling referral process of academic advisors, resident assistants, and student personnel workers referring students to the University Counseling Center was assessed. The Referral Process Inventory (RPI) was developed to assess four areas related to the referral process. The results indicate differential knowledge of referral between groups and need for greater consultation and information about referral between the University Counseling Center and other agencies on campus. (Author)

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COUNSELING CENTER
UNIVERSITY OF KANSAS
LAWRENCE, KANSAS

THE COUNSELING REFERRAL PROCESS
AND DEGREE OF UNDERSTANDING
OF HELPING SERVICES AT
THE UNIVERSITY OF KANSAS

Research Report #77-2

James M. O'Neil, Gary E. Price, and Darwin Eads

CG011713

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
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The role of consultation for the college counselor and student personnel worker is an emerging role (Kitchner & Hurst, 1974). Consultative intervention models have been devised identifying the type, focus, and entry points for consultation to encourage a more preventative and developmental approach to campus mental health (Morrill, Oetting, & Hurst, 1974; Conyne & Clack, 1975).

A central factor in any consultative model is the referral network between the consultant and the consultee. The professional literature on counseling referral process is limited. The only major theoretical statement on referral found was a conceptual article by Corazzini & Shelton (1974). In a extensive review of the literature, only three empirical studies on referral were identified. Kunce and Anderson (1970) investigated referral of clients between counselors themselves. Two other studies reported results about the differences in clients who are self referred versus other referred (Redding, 1971; Mann, 1971). Neither of these studies investigated how professionals go about the process of referral, and no other empirical research was found on the process of referral for counseling.

Since the referral process is a central function in counseling and consultation, and since no research could be found on the referral process, this research was designed to assess the process that student personnel workers, resident assistants, and academic faculty use when referring students to counseling professionals on campus. This research asked questions in four areas about the process of referring students to the University Counseling Center by student personnel workers, resident assistants, and academic faculty. The professionals were asked questions in the areas of:

1. Knowing how to refer students for counseling

2. Knowledge of different referral sources for counseling.
3. Knowing the kinds of problem areas that should be referred for counseling.
4. Expressing a need to improve their knowledge of the referral process and the information about various agencies on campus.

Method

Subjects

Three groups of individuals were identified as sources of referral to the University Counseling Center (N=510) at the University of Kansas. The three groups consisted of academic faculty serving as academic advisors (N=382), full time student personnel workers (N=68), and resident assistants (N=60). The academic advisors were identified from a list provided by the Academic Advising Office, and the student personnel and resident assistants were identified through the Office of the Student Affairs. Each subject was sent a twenty-two item questionnaire called the Referral Process Inventory (RPI) (O'Neil, Price, & Eads, 1975). The RPI was sent to each subject through campus mail. A follow-up mailout was completed two weeks after the first mailout. Three hundred-thirty-six subjects completed the questionnaire which represented a 66% return rate.

Measures

The RPI consisted of twenty-two items answered on a likert scale from 1 (strongly disagree) to 5 (strongly agree). Four scores were determined for each of the respondents to the RPI.

Insert the Referral Process Inventory here

Respondents were asked questions about referral in the following four areas:

(1) How to make a referral--items 4, 8, 13, 16, 19, and 20; (2) Who to make a

referral to--items 1, 5, 6, 9, 10, 12, 14, 17, and 18; (3) The kinds of problems to refer--items 2, 11, 15, and 22; and (4) Desire to improve knowledge of referral process--items 3, 7, and 21. Table 1 summarizes the number of items, Hoyt's reliability, standard error, means and standard deviations for each of the scales.

Insert Table 1 here

Analysis

A one-way analysis of variance for unequal numbers procedure was used to determine if there was significant difference between the three groups for each of the scales. The null hypothesis stated there would not be a significant difference ($p < .05$) among the three groups on the four scales.

Results

The results from the analysis of variance procedures are summarized in Table 2 for each group for each of the scales. Significant differences were found for each of the four comparisons.

Insert Table 2 here

In examining the four scales, the data indicates the following. Examining scale one (How to make a referral), student personnel workers had a significantly higher mean than did resident assistants or academic advisors. For scale two (Who to make a referral to), three (Kinds of problems to refer), and four (Improvement of knowledge of referral process), the academic advisors had a significantly lower mean than did the resident assistants or the student personnel workers. In summary the student personnel workers and resident assistants were

not significantly different in whom to make a referral to, the kinds of problems to refer, and also supportive of improving the referral process. Academic advisors were significantly less knowledgeable than the student personnel workers in all of the scales related to referral. In addition, academic advisors were significantly less knowledgeable than the resident assistants in knowing who to make a referral to, kinds of problems to refer and desiring to improve the referral process.

Discussion

The data indicate that when ranking (from most positive to least positive) the three groups in terms of their knowledge of the referral process and their willingness to improve the referral network, student personnel workers were first, resident assistants were second, and academic advisors were third. The only exception was on scale 2 (Whom to make a referral to), where the resident assistants showed a higher mean than student personnel workers, but this difference was not significant. The significant results are best explained when comparing the scales of academic advisors with student personnel workers and resident assistants.

The results are not surprising since it would be expected that student personnel workers would be more expert due to training in the referral process than resident assistants. Although resident assistants receive some training, it would seem plausible that they would not show the same level of expertise as full-time student personnel workers. The significant differences between academic advisors and the other two groups are also understandable. Academic advisors usually receive little or no training or information on how to refer students for help.

In looking more closely at information related to future improvement of the referral process, the data indicate strong support for future cooperation

and consultation in improving the referral network. Seventy percent of the student personnel workers, 77% of the resident assistants, and 44% of the academic faculty indicated they would support an inservice training program on referral. Twenty-five percent of the samples indicated they were unsure about supporting an inservice session on referral. Fifty-three percent, 51%, and 73% of student personnel workers, resident assistants, and academic faculty respectively, indicated they needed more information on where they should refer students for counseling. Eighty-four percent of the subjects indicated that a printed listing of counseling professionals would be helpful when referring students for counseling help. This specific information about referral suggests a need for future consultation and steps to improve the campus referral network between the Counseling Center and other campus agencies.

This research supports the importance and expanded role of referral in the University setting found by Mullinex (1976). It also indicates that faculty and staff are concerned about the referral process. The issue of referral may provide the counselor and student personnel worker with a mutual, non-threatening, and important topic to do direct consulting or inservice activities with faculty. Kopplin and Rice (1975) have discussed consulting with faculty as necessary and possible in helping troubled students who are beyond the Counseling Center or student development center doors.

As counseling and student personnel work become more preventative, developmental, and consultative in nature, knowledge of the referral process will become more important. Further research on the referral process needs to be done. The effects of sensitizing faculty and student personnel workers to the referral process and the effects of referral on student attitudes and behaviors need further research.

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Table 1

Referral Inventory Scale Information

Total Number of Respondents = 349

Area Measured	Number of Items	Mean	Standard Deviation	Hoyt's Reliability	Standard Error
Scale					
1. How to make a referral	6	19.86	5.17	.75	2.37
2. Who to make a referral to	9	25.46	7.43	.84	2.79
3. Kinds of problems to refer	4	12.43	3.83	.73	1.73
4. Improvement of and knowledge of referral process	3	9.87	3.47	.88	.98

Table 2

Analysis of Variance on Referral Process Inventory (RPI)

<u>Group</u>		<u>Scales</u>			
		1	2	3	4
Student Personnel Workers N=57	Mean	22.07	30.49	15.32	11.72
	Standard Deviation	2.69	4.87	2.84	2.68
Resident Assistants N=54	Mean	20.85	31.04	14.83	11.52
	Standard Deviation	3.41	4.31	2.47	2.32
Academic Advisors N=225	Mean	20.20	24.26	11.83	9.57
	Standard Deviation	3.52	4.97	2.68	2.90
	F - value	7.08**	66.66**	57.92*	20.26*
	df - 2,333				

*p<.0001

**p<.001

THE REFERRAL PROCESS INVENTORY*

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*Copywrited, 1977. The Referral Process Inventory was presented as part of the paper "Campus Consultation and the Counseling Referral Process: An Empirical Investigation" at the annual meeting of the American Psychological Association in San Francisco, California, August, 1977.

The Referral Process Inventory (RPI) is designed to assess how campus faculty, staff, and paraprofessionals feel about the counseling referral process in four general areas: (1) how to refer, (2) knowledge of different referral sources, (3) kinds of problems to refer, (4) future improvement of the campus referral system. Each of these areas constituted a subscale. Subscale 1 included items 4, 8, 13, 16, 19, and 20. Subscale 2 includes items 1, 5, 6, 9, 10, 12, 14, 17, and 18. Subscale 3 includes items 2, 11, 15, 22. Subscale 4 includes items 3, 7, and 21.

Although the RPI is designed to assess and improve the counseling referral process, it also serves as a way of sensitizing the campus or community to the importance and value of constructive referrals. Additionally, the RPI may serve as a way of developing positive consultative relationships between the counseling agency and the campus or community and may stimulate in-service training to improve the referral network.

REFERRAL PROCESS INVENTORY (RPI)

by

James M. O'Neil, Gary E. Price, and Darwin Eads

Please answer the following questions on referral using the following five point scale:

Strongly
Disagree
1

Disagree
2

Not Sure
3

Agree
4

Strongly
Agree
5

1. _____ I need more information to identify where I should refer students for counseling.
2. _____ I know the kinds of problems that students have that the Counseling Center can help with.
3. _____ I would support an in-service training program on how to make referrals to counseling professionals on campus.
4. _____ Telling students that they might profit from professional counseling is difficult for me.
5. _____ I feel knowledgeable about the counseling services available to students at the University of Kansas.
6. _____ I understand the services that are provided by the Counseling Center.
7. _____ I would support an in-service training program on the services that the Counseling Center offers.
8. _____ The specific mechanics of referring a student to a counseling professional is unclear to me.
9. _____ I understand the services that are provided by the Mental Health Clinic.
10. _____ It would be helpful to have a printed listing of counseling professional to refer to when students need counseling help.
11. _____ A person needs to be "pretty disturbed" before one should refer them for professional counseling.
12. _____ I understand the services that are provided by the Dean of Men's Office.
13. _____ How to make a referral to a counseling professional is unclear to me.
14. _____ I understand the services that are provided by the Dean of Women's office.
15. _____ I am not sure what kinds of problems would be referred to counseling professional on campus.

16. _____ If I knew more about the counseling process, referring students for counseling would be easier.
17. _____ I feel that I need to know the counselor before I make a referral to him or her.
18. _____ I understand the services that are provided by the Psychology Clinic.
19. _____ I can make a referral to an agency even if I am not personally acquainted.
20. _____ I would be comfortable making referrals to counseling professionals over the phone.
21. _____ I would be interested in meeting the counseling professionals for the purpose of understanding their services better.
22. _____ During the academic year, it is common for you to meet students who need to be referred to a counseling professional.